Please submit comments to Hannah Shin-Heydorn at hshinheydorn@lakeforestca.gov by Wednesday, April 8 at 5 p.m.

Insurance Broker Services

Scope of Work

The Scope of Work is expected to be completed on an annual basis.

- 1. Annual review of employee benefits for quality of benefits provided, cost effectiveness, competitiveness, and plan administration (by both the City and provider). Make recommendations concerning any changes in plan terms, conditions, and limits.
- 2. Assist with annual health benefit plan renewals, including negotiation of any changes in contracts, soliciting proposals from new providers, etc.
- 3. Monitor ongoing contracts, including provider plan administration, tracking of performance standards, provider compliance with contract and incurred claims.
- 4. Monitor group experience and provide estimates and projections of renewal rates. Assist City staff to prepare budget amounts for employee benefits.
- 5. Evaluate appropriateness of alternative financing mechanisms such as partial or self-funding, and assist in structuring such financing, including recommendation or retention levels, stop-loss limits, etc.
- 6. Provide information on employee benefits issues, trends and proposed or new legislation.
- 7. Be available to meet as needed with City staff and employees enrolling and participating in sponsored plans.
- 8. Conduct an initial open enrollment (as needed) of all employee and retiree plan participants. Collect and organize participant information for all benefit plan participants. Coordinate ongoing administrative services to support enrollment of new employees and all other participant changes including assisting with COBRA compliance.
- 9. Conduct ongoing annual open enrollment activities including designing and producing employee health benefits brochures and coordinating all activities required for a successful annual open enrollment period.
- 10. Be able to accumulate information for GASB 45 as needed.
- 11. Be able to share information electronically with City and City's systems as needed.
- 12. Be available as needed to answer questions and resolve issues that arise during the year regarding employee benefits contract administration and service provisions.

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13. Review and assist in the resolution of any disputes between plan providers and plan participants regarding coverage, billing questions and service delivery.

